	y of Portland, Maine - Buil	0			Per	rmit No: 07-1468	Issue Dat	e:	CBL: 049 A0	01001	
389 Congress Street, 04101 Tel: (207) 874-8703, Location of Construction: Owner Name:				207) 874-8710	Owner Address:			Phone:			
165 PARK AVE CITY OF PO					389 CONGRESS ST			i none.			
Bus	iness Name:				Contractor Address:			Phone			
_			Bellino - Grosso			980 Riverside St Portland			2078782087		
Lessee/Buyer's Name Phone:			hone:		Permit Type: HVAC					Zone:	
	t Use:	Proposed Use:	Proposed Use: Hadlock Field - Sea Dog		Perm	Permit Fee: Cost of Wor					
На	dlock Field - Sea Dogs Clubhous			ew Trane Roof top 7 Gas/ Electric 2 Packaged terminal		\$150.00 \$12,90 FIRE DEPT: Approved		000.00 2 INSPECTION:			
		units - 3 unitar				FIRE DEPT: Approved Denied		Use Group: Type		Type	
										2) 0	
		air conditionir	ng units								
-	posed Project Description:	•									
	w Trane Roof top units - 3 unitary		oftop units & 2		Signature:		Signature:				
Packaged terminal air conditioning units						PEDESTRIAN ACTIVITIES DISTRIC			CT (P.A.D.)		
					Action Approved Approved Approved			proved v	ed w/Condition Denied		
					Signat	ture:			Date:		
Permit Taken By: Date Applied For: 12/04/2007				Zoning Approval							
1.	This permit application does no	t preclude the	Spec	Special Zone or Reviews		Zoning Appeal			Historic Preservation		
	Applicant(s) from meeting applicable State and Federal Rules.		Shoreland		☐ Variance			☐ Not in District or Landn			
2.	Building permits do not include plumbing, septic or electrical work.		☐ Wetland		Miscellaneous			☐ Does Not Require Revie			
3.	Building permits are void if work is not started within six (6) months of the date of issuance.		☐ Flood Zon			Conditional Us			Requires Review		
False information may invalidate a building permit and stop all work		e a building	Subdivision			☐ Interpretatio			Approved		
			Site Plan			Approved			☐ Approved w/Condition		
			Maj Mino MM		☐ Denied			☐ Denied			
			Date:			Date:		D	Date:		
I ha juri: shal	reby certify that I am the owner over the country of the owner soliction. In addition, if a permit for the country to enter all a such permit.	to make this appl or work described	amed proication a	as his authorized application is iss	ne prop d agent sued, I	t and I agree t certify that th	to conform to ne code office	to all ap	oplicable laws athorized repre	of this esentative	
SIC	NATURE OF APPLICAN			ADDRES:	S		DATE		F	РНО	

3) Equipment must be install4) The appliance shall be inst	led in compliance with the man talled in accordance with the IN atus: Approved	•	A 211	Approval Dat	e: 12	(05/2007	
3) Equipment must be install	1	•					
,	led in compliance with the man	ufacturer's specifi	cations				
2) The installation must com							
2) The installation must com	ply with the State of Maine Ga	as Regulations.					
ASTM 814 or UL 1479, pe		aca by an approve	ed mestop system mstar	ned as tested in a	ccordance	WILII	
- 10121	ated assemblies must be protect	eted by an approve	ed fireston system instal				
Dept: Building St. Note:	atus: Approved with Condition	ons Reviewer.	Chris Hanson		Ok to Issu		
Dept: Building St	1 21 0 12	ons Reviewer:	Chris Hanson	Approval Dat	12	21/2007	
Note:	atus. Approved	Tevrewer.	Warge Semindekar		Ok to Issu		
Dept: Zoning St	atus: Approved	Reviewer:	Marge Schmuckal	Approval Dat	e: 12.	04/2007	
			HVAC				
Lessee/Buyer's Name	Phone:		Permit Type:	-		Zone:	
Business Name:				Contractor Address: 980 Riverside St Portland		Phone 2078782087	
		CITY OF PORTLAND					
165 PARK AVE		Owner Name:			Phone:		

CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in the application is issued, I certify that the code official's authorized representative shall have the authority to enter all areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

SIGNATURE OF APPLICAN	ADDRESS	DATE	PHO
DECDONGINI E DEDGON IN CHARCE OF WORK TIT		DATE	DIIO
RESPONSIBLE PERSON IN CHARGE OF WORK, TIT	DATE	PHO	